CHILD DEVELOPMENT SERVICES/YOUTH SERVICES PREEMPLOYMENT BACKGROUND CHECK/MEDICAL ASSESSMENT CHECKLIST (USAREUR Reg 608-20)

Servicing CPO		Responsible FCC office			
Employee/applicant name		Title, series and grade			
Name of organization		EOD date/certification date			
Background check/source	Date forwarded		Date followed-up	Date returned	Action taken
Preemployment inquiry					
NAC/NACI					
MP/SP/DDTMS name check (include master offender list)					
CID/OSI check					
Alcohol/drug abuse check					
FACMT/central registry					
Medical assessment					
Outpatient treatment record					
*Social work services					
*Psychiatry check					
*Psychology check					
For FCC only					
Building coordinator					
Sponsor's unit commander					
Three personal references					
*Only if initial screen suggests problems relevant to CDS work.					